	Non-Refundable	Processing Fee:
[]	Registration	\$25.00

CFS-4 Master List Registration Form Utah State Central Filing System

Name:				
E-mail Address:	Phone Number:			
Address:				
City:	State: _	Zip:		
I am registering for:				
() A full Master Lis	t of all Utah Counties and all farm pro	oducts, or		
() A partial listing of	of counties and/or farm products			
If you register for a partial li	sting:			
1. You must specify	1. You must specify the counties for which you want a partial list, and			
2. You must specify	the farm product category and speci-	fics for which you want a partial list, and		
3. You can register	for any farm products within any cou	inty in the state of Utah.		
County	Category	Specifics		
Signature:		Date:		

Mail In: PO Box 146705

Salt Lake City, UT 84114-6705 Walk In: 160 East 300 South, Main Floor **Information Center:** (801) 530-4849 Toll Free: (877) 526-3994 (within Utah)

Fax: (801) 530-6438

Web Site: http://www.commerce.utah.gov